MEI Form -1.2, (July 1, 2005)

Docket No.

				ICATION		
next to my name; and I believe	that I am the orig	inal, first and sole inve	entor (if only one name is listed b	elow) or an original, first		
Title: SEMICONDUCTOR IN	TEGRATED CIF	CUIT AND NONCO	NTACT INFORMATION SYS	TEM INCLUDING IT		
which is described and claimed the attached specification		box is not checked, th	e specification of which is attache	ed hereto):		
☐ the specification in the Ap	plication No		filed on	_;		
and with amendments file	d on	No. PCT/ IP2005/007/	(if applicable),	or		
filed <u>April 12, 2005</u>	and as ar	mended on	(if applicable).			
I hereby state that I have	e reviewed and ur	derstand the contents				
I acknowledge my duty patentability as defined in Title 3	to disclose to the 37, Code of Federa	U.S. Patent and Trade al Regulations, §1.56.	emark Office all information know	n to me to be material to		
application(s) for patent or invection invection in the country other than the United S	entor's certificate, of tates of America, I	or §365(a) of any PC1 isted below, and have	Finternational application which also identified below any foreign	designated at least one application for patent or		
COUNTRY	APPLIC	ATION NO.	DATE OF FILING	PRIORITY CLAIMED		
JAPAN	2004-120168		April 15, 2004	Yes		
Number		(Day/Month/Year Filed)				
			(Day/Month/Year Filed)			
			(Day/Month/Year Filed)			
	amed inventor, I hereby declare that: my residence, post office address and citizenship are as stated below I believe that I am the original, first and sole inventor (if only one name is listed below) or an original, first ural inventors are named below) of the subject matter which is claimed and for which a patient is sought on CTOR INTEGRATED CIRCUIT AND NONCONTACT INFORMATION SYSTEM INCLUDING IT declarmed in (if the following box is not checked, the specification of which is attached hereto): selfication, or in the Application No					
			(Day/Month/Year Filed)			

□ Additional U.S. provisional application numbers are listed on a supplemental priority sheet attached hereto.

I hereby claim the benefit under Title 35, United States Code §120 of any United States application(s), or §365(C) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of

MEI Form -1.2, (July 1, 2005)

Docket No.

I hereby claim the benefit under Title 35, United States Code §120 of any United States application(s), or §365(C) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT international application in the manner provided by the first paragraph of Title 35, United States Code §112, I acknowledge the duty to disclose information material to patentability as defined in Title 37, Code of Federal Regulations, §1.56 which occurred between the filing date of the prior application and the national or PCT international filing date of this application.

APPLICATION NO.	U.S. FILING DATE	STATUS: PATENTED, PENDING, ABANDONED

□ Additional U.S. or international application numbers are listed on a supplemental priority sheet attached hereto.

POWER OF ATTORNEY: As a named inventor, I hereby appoint the attorneys and agents associated with U.S. Patent and Trademark Office Customer Number identified bellow to prosecute this application and to transact all business in the U.S. Patent and Trademark Office connected therewith, and direct that all correspondence be addressed to that customer number.

I hereby authorize the U.S. attorneys and agents associated with the customer number to accept and follow instructions from Matsushita Electric Industrial Co., Ltd., and any affiliated or subsidiary company thereof, received via their corporate representatives and/or their foreign patent attorneys or agents, if any, as to any action to be taken in the U.S. Patent and Trademark Office regarding this application without direct communication between the U.S. attorneys or agents and myself.

Direct Correspondence to:		
	CUSTOMER NUMBER 53080	

I further declare that all statements made herein of my own knowledge are true, and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

Full Name of Sole or First Inventor	FIRST NAME George	LAST NAME NAKANE	SIGNATURE FEOTGE NOLANE	マ/ -	SIGNATURE ≥0, ≥∞6
Residence & Citizenship	CITY Nara	STATE OR COUNT Japan	RY	COUNTRY OF C	ITIZENSHIP
Post Office Address	ADDRESS C/O Matsushita Elec	CITY tric Industrial Co., Ltd.,1006,		COUNTRY ni, Osaka Japan	ZIP CODE 571-8501

Full Name of Second Inventor	FIRST NAME Tatsumi	LAST NAME SUMI	T+ 1 / 11 71	SIGNATURE
Residence & Citizenship	CITY Osaka	STATE OR COUNT	RY COUNTRY OF Japan	CITIZENSHIP
Post Office Address	ADDRESS C/O Matsushita Elec	CITY tric Industrial Co., Ltd.,1006,	STATE OR COUNTRY Oaza Kadoma, Kadoma-shi, Osaka Japan	ZIP CODE 571-8501

Docket No.

MEI Form -1.2, (July 1, 2005)

Full Name of Third inventor	FIRST NAME	LAST NAME	SIGNATURE	DATE O	FSIGNATURE
Residence & Citizenship	CITY	STATE OR COUNTRY	COUNTRY OF CITIZENS		F CITIZENSHII
Post Office Address	ADDRESS	CITY	STATE OR COUNTRY ZI		ZIP COD
Full Name of	FIRST NAME	LAST NAME	SIGNATURE	DATE O	F SIGNATURI
Fourth Inventor				571120	
Residence & Citizenship	CITY	STATE OR COUNTRY	COUNTRY OF CITIZENS		FCITIZENSHII
Post Office Address	ADDRESS	CITY	STATE OR COUNTRY ZIP C		ZIP COD
Full Name of	FIRST NAME	LAST NAME	SIGNATURE	DATE O	F SIGNATURE
Residence & Citizenship	CITY	STATE OR COUNTRY		COUNTRY OF CITIZENS	
Post Office Address	ADDRESS	CITY	- COOKING OF CITIZE		ZIP CODI
ull Name of	FIRST NAME	LAST NAME	CICNATURE		
Sixth Inventor	, mornanc	LAST NAME	SIGNATURE	DATE OF	SIGNATURE
lesidence & Citizenship	CITY	STATE OR COUNTRY		COUNTRY OF CITIZENS	
ost Office Address	ADDRESS	CITY	STATE (STATE OR COUNTRY ZIP C	
ull Name of eventh inventor	FIRST NAME	LAST NAME	SIGNATURE	DATE OF	SIGNATURE
esidence & Citizenship	CITY	STATE OR COUNTRY		COUNTRY OF CITIZENS	
ost Office Address	ADDRESS	CITY	STATE C	OR COUNTRY	ZIP CODE
(If there are more than inventors) above application may be m		e add a copy of this page for ide	ntification and signa	ature for the additi	onal
		as follows: Filing Date			
					<u> </u>
icant Reference Number P.	37480-01	Attorney Docket No			